PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or <u>Fax</u> (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where ar in m

maintenance fee notifications. CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 1 for any change of address) 80711 7590 06/25/2009 Brinks Hofer Gilson & Lione/Ann Arbor 524 South Main Street Suite 200					on of maintenance fees will be mailed to the current correspondence address as a correspondence address; and/or (b) indicating a separate "FEE ADDRESS" for Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission. Certificate of Mailing or Transmission I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.					
		/Eric J. Baude/								
				Se	ptember 21, 200)9			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENT	TOR	R ATT		RNEY DOCKET NO. CONFIRMA		TION NO.	
10/593,545	.545 07/16/2007		Vincent A. Fischett		12157/017 (RU-65			(1) 2567		
BACTERIA AND SPOR	RES	ND SPORE SURFACE						_		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE D	UE .	PREV. PAID ISSUE FEE		TOTAL FEE(S) DUE	DATI	E DUE	
nonprovisional	yes	\$755 	\$300		\$0		\$1055 09/25/2009		5/2009	
EXAMINER		ART UNIT	CLASS-SUBCLASS	\Box						
DESA1, A	NAND U	1656	435-007320							
	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. THE PATENT (print or type)									
PLEASE NOTE: Unl recordation as set fort (A) NAME OF ASSIG	e data will appear on the patent. If an assignee is identified below, the document has been filed for DT a substitute for filing an assignment. (B) RESIDENCE: (CITY and STATE OR COUNTRY)									
The Rockefelle	er University	New York, NY								
Please check the appropr	riate assignee category or	r categories (will not be p	rinted on the patent):		Individual 🖺 Co	orporati	on or other private gro	oup entity 📮	Government	
4a. The following fee(s) are submitted:			 Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) A check is enclosed. Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 23-1925 (enclose an extra copy of this form). 							
5. Change in Entity Sta a. Applicant claim	tus (from status indicate as SMALL ENTITY stat		☐ b. Applicant is no	longe	er claiming SMAl	LL EN	ГІТҮ status. See 37 С.	FR 1.27(g)(2).		
		uired) will not be accepte ates Patent and Trademark		an the	e applicant; a regi	stered :	attorney or agent; or th	ne assignee or	other party in	
Authorized Signature			DateSepte	ember	21, 2009					
Typed or printed nam	Registration No 47,413									
an application. Confiden submitting the completed this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the ions for reducing this bu irginia 22313-1450. DO 13-1450.	CFR 1.311. The informatic U.S.C. 122 and 37 CFR E USPTO. Time will vary trden, should be sent to the D NOT SEND FEES OR	1.14. This collection is depending upon the in the Chief Information Of COMPLETED FORMS	s estir ndivid fficer, S TO	mated to take 12 a dual case. Any co , U.S. Patent and THIS ADDRESS	minutes omment Traden S. SENI	s to complete, includir s on the amount of ti- nark Office, U.S. Dep D TO: Commissioner	ng gathering, p me you require artment of Cor for Patents, P.0	reparing, and to complete mmerce, P.O.	

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.